Author’s response to reviews

Title: Sexual function and chemotherapy in postmenopausal women with breast cancer

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Author’s response to reviews: see over
COVER LETTER

Reviewer Mary Panjari

Thank you very much for your considerations.

Major Concerns

Corrections to Discussion section structure done

Weakness pointed

Many results were not discussed because they are of less importance than the reduction on FSFI score and are simple descriptions of tumor/demographic characteristics.

Minor essential revisions

All suggestions to Introduction were accepted and corrected

Referring to Material and Methods, the cohort is the analysis of breast cancer groups at two different moments – post diagnosis and post treatment (first cycle of chemotherapy) and it is nested on a cross-sectional study comparing with postmenopausal women at routine care. The number of patients was calculated considering a loss of 20 percent in FSFI score comparing case and control groups with 90% of power and significance at 0.05 (it was not correctly referred on first version, sorry)

Inclusion criteria did not allow current use of HT trying to access FSFI with no influence of hormones. Breast cancer patients had history of HT prior to diagnosis in only 4 patients. FSFI was calculated first time 30 days after diagnosis, reflecting the last 4 weeks. Prior diagnosis of breast cancer means patients with diagnosis but naïve treatment. They had the results of core biopsies and were referred to our center to start treatment.

ECOG is the scale used to evaluate clinical performance and is indicated by reference mark - *Eastern Cooperative Oncology Group (ECOG)*.

Results

Prior diagnosis means pt came with positive core biopsy and no treatment. Women with BC recurrence were not accepted.

Discussion

All suggestions accepted
COVER LETTER

Reviewer Jennifer Jabson

Thank you very much for your considerations.

Major Concerns

Introduction reorganized and corrections done.

Methods

Study design clarified. The cohort nested in this cross-section study is composed by 24 consecutive pt with breast cancer for primary chemotherapy and all pts were submitted to FSFI at two different moments, post diagnosis and post first cycle of chemotherapy.

All pts agreed participate and number of pts was calculated based on a loss of 20% of FSFI score in case group with power of 90% and significance at 0,05 ( it was not referred on previous version, sorry)

All suggestions were accepted.

Results

Test statistics are at bottom of all tables defining p-values.

On page 7, there is no pre-post control group and sentence corrected.

Combining tables could generate huge tables

25% of case group – corrected.

Discussion

Re-stated discussion was made

Page 10 – corrected. Prior diagnosis means pt with positive core biopsy referred to our center to start treatment. No breast cancer recurrences were accepted.

Losses on FSFI related in this paper are defined at two specific points as you said. The objective of the study was measure these losses. Pumo’s paper does not point this, just refers that some sexual problems does exist and is compared with Beck’s scale for depression and other tools. We are trying to determine the quantitative loss. Qualitative and persistent loss should be evaluated by larger and complex studies.

Minor essential revisions

All suggestions to Introduction were accepted and corrected